

countless small business owners in the Big First who cite the Biden bonus as the reason why they cannot find workers and completely reopen.

The data doesn't lie. There are nearly 8 million open jobs in America right now, a new record. The Biden bonus, at a time when employers are searching for workers, is unwanted Federal Government interference in the marketplace.

I recently joined fellow Kansas Republicans in urging the Kansas Governor to opt out of enhanced unemployment benefits. I cosponsored the Help Wanted Act, which addresses the severe labor shortages caused by the Federal unemployment policy.

It is time to take off the masks, get our kids back to school, get our businesses open, and get people back to work so we can get America back on track.

#### LET US RESUME THE PEOPLE'S BUSINESS

(Mr. BURGESS asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. BURGESS. Madam Speaker, the pandemic has taken a terrible toll on the country. The pandemic has taken a terrible toll on Congress. In its current state, Congress is not working. We have restrictions on the voting process, we have widespread proxy voting and remote hearings. That has all contributed to the current state of dysfunction. But the good news is this can be fixed.

Look, the Doctors Caucus are Members of Congress with medical backgrounds, well-versed in evaluating medical risks and benefits for patients, proposed courses of action, and we have worked vigorously to educate our constituents that the coronavirus vaccines are safe and effective, yet we are not setting a good example of what happens when vaccine participation is high.

The Doctors Caucus has sent requests to the Office of the Attending Physician and the Speaker of the House appealing for updated guidelines consistent with the science and the Centers for Disease Control.

There will be a motion on the floor of this House later this afternoon, fully supported by members of the Doctors Caucus. I urge all Members to carefully consider that proposal and to vote in favor.

#### CONDEMNING THE HORRIFIC SHOOTINGS IN ATLANTA

(Ms. LETLOW asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. LETLOW. Madam Speaker, as a woman of faith, I am called to love my neighbor as myself and to bear one another's burdens. My heart is heavy with the burden, pain, and loss experi-

enced by the Asian American and Pacific Islander communities.

Unfortunately, we have seen a nationwide rise in hateful and harmful acts toward Asian Americans and Pacific Islanders. Targeted violence against anyone based on who they are cannot be tolerated. It is not who we are as a people and goes against everything we represent as a nation.

Today, I had hoped to be able to support H. Res. 275, condemning the horrific shootings of the eight Asian women in Atlanta, to honor the lives of the victims, and recognize the basic American fundamentals that reject hatred and violence.

Instead, what would have been a fitting and honorable resolution ended up being just another vehicle for delivering cheap shots against our former President.

I am disappointed that I cannot support this resolution as written.

#### GREATER HALL CHAMBER OF COMMERCE AGRIBUSINESS AWARDS

(Mr. CLYDE asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. CLYDE. Madam Speaker, I rise today to recognize the 2021 recipients of the Greater Hall Chamber of Commerce's annual agribusiness awards.

The Greater Hall Chamber of Commerce comes together each year to recognize and celebrate the contribution of agriculture in our everyday lives. We were blessed to be hosted by the Echols family at Jaemor Farms this year.

The Farmer of the Year award went to Mr. Scott Glover of Glo-Crest Dairy and Mountain Fresh Creamery. In fact, I recently had the privilege to tour Mr. Glover's farm, and it was indeed an impressive operation.

The Friend of Agriculture award was given to the Hall County School District's Agri-Business Center for their agriculture programs and the related education they provide to their students.

Cargill, Incorporated, was awarded the Outstanding Agribusiness award for its generous donations of nearly \$100,000 in the past number of years.

Additionally, Mr. Phil Hulsey was inducted into the Hall County Agriculture Hall of Fame for his incredible lifetime contributions as a dairyman.

Agriculture is the leading industry in Georgia, bringing in about \$73 billion annually. I thank the Greater Hall Chamber of Commerce for allowing me the opportunity to join them in honoring agricultural leaders in Hall County, Georgia.

Madam Speaker, I congratulate this year's winners on their achievements in the agriculture industry.

#### RECOGNIZING THE SERVICE OF JASON PHELPS

(Ms. TENNEY asked and was given permission to address the House for 1

minute and to revise and extend her remarks.)

Ms. TENNEY. Madam Speaker, it is my great honor to recognize my constituent services director, Jason Phelps, of New Hartford, New York, for 20 years of outstanding service to the people of upstate New York.

Jason began his service as an intern for former Congressman Sherry Boehlert in Washington, D.C., and, after a short time working for a nonprofit, became a member of Boehlert's Utica staff, where he dedicated himself to veterans' case work. Jason has worked for five different Members of Congress in the Mohawk Valley and has served countless veterans across the region.

No matter how complex the case, Jason is always ready to jump in to assist our veterans. From cutting through VA red tape, to making sure a veteran and their family receives the Purple Heart they earned through their service, Jason approaches each case with determination and compassion.

Not only is Jason an amazing veterans' advocate, he is also a role model and an inspiration to the many staff and interns he has worked with in all these offices throughout the years.

Jason, thank you for your many years of service to our brave veterans and for also being the guiding light for our staff and our community. We all look forward to working with you for many more years to come.

#### REMEMBERING ANDRE THE GIANT

(Mr. BISHOP of North Carolina asked and was given permission to address the House for 1 minute.)

Mr. BISHOP of North Carolina. Madam Speaker, last but certainly not least, today I rise to honor the life of the eighth wonder of the world on what would have been his 75th birthday: Andre Roussimoff, better known as Andre the Giant, who spent his final years in the small town of Ellerbe, right in the middle of the Ninth District of North Carolina.

Standing 7 feet 4 inches tall and weighing over 500 pounds, Andre was known for his time in the World Wide Wrestling Federation, where he was a fan favorite. During his professional career, he headlined WrestleMania and also defeated Hulk Hogan to win the WWF World Heavyweight Championship. To nonwrestling fans, he is best known for playing the role of Fezzik in the 1987 film "The Princess Bride."

Despite his great size, those who knew him found him to be gentle and kind. Andre passed away at the age of 46 in 1993, and his ashes were scattered on his beloved Ellerbe ranch.

I am proud today to pay tribute to the memory of Ellerbe's most famous resident.

□ 1230

#### FAIRNESS IN ORPHAN DRUG EXCLUSIVITY

Mr. PALLONE. Madam Speaker, pursuant to House Resolution 403, I call up

the bill (H.R. 1629) to amend the Federal Food, Drug, and Cosmetic Act with respect to limitations on exclusive approval or licensure of orphan drugs, and for other purposes, and ask for its immediate consideration in the House.

The Clerk read the title of the bill.

The SPEAKER pro tempore (Ms. JACKSON LEE). Pursuant to House Resolution 403, the bill is considered read.

The text of the bill is as follows:

H.R. 1629

*Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,*

#### SECTION 1. SHORT TITLE.

This Act may be cited as the “Fairness in Orphan Drug Exclusivity Act”.

#### SEC. 2. LIMITATIONS ON EXCLUSIVE APPROVAL OR LICENSURE OF ORPHAN DRUGS.

(a) IN GENERAL.—Section 527 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360cc) is amended—

(1) in subsection (a), by striking “Except as provided in subsection (b)” and inserting “Except as provided in subsection (b) or (f)”; and

(2) by adding at the end the following:

“(f) LIMITATIONS ON EXCLUSIVE APPROVAL, CERTIFICATION, OR LICENSE.—

“(1) IN GENERAL.—For a drug designated under section 526 for a rare disease or condition pursuant to the criteria set forth in subsection (a)(2)(B) of such section, the Secretary shall not grant, recognize, or apply exclusive approval or licensure under subsection (a), and, if such exclusive approval or licensure has been granted, recognized, or applied, shall revoke such exclusive approval or licensure, unless the sponsor of the application for such drug demonstrates—

“(A) with respect to an application approved or a license issued after the date of enactment of this subsection, upon such approval or issuance, that there is no reasonable expectation at the time of such approval or issuance that the cost of developing and making available in the United States such drug for such disease or condition will be recovered from sales in the United States of such drug, taking into account all sales made or reasonably expected to be made within 12 years of first marketing the drug; or

“(B) with respect to an application approved or a license issued on or prior to the date of enactment of this subsection, not later than 60 days after such date of enactment, that there was no reasonable expectation at the time of such approval or issuance that the cost of developing and making available in the United States such drug for such disease or condition would be recovered from sales in the United States of such drug, taking into account all sales made or reasonably expected to be made within 12 years of first marketing the drug.

“(2) CONSIDERATIONS.—For purposes of subparagraphs (A) and (B) of paragraph (1), the Secretary and the sponsor of the application for the drug designated for a rare disease or condition described in such paragraph shall consider sales from all drugs that—

“(A) are developed or marketed by the same sponsor or manufacturer of the drug (or a licensor, predecessor in interest, or other related entity to the sponsor or manufacturer); and

“(B) are covered by the same designation under section 526.

“(3) CRITERIA.—No drug designated under section 526 for a rare disease or condition pursuant to the criteria set forth in subsection (a)(2)(B) of such section shall be eli-

gible for exclusive approval or licensure under this section unless it met such criteria under such subsection on the date on which the drug was approved or licensed.”.

(b) RULE OF CONSTRUCTION.—The amendments made in subsection (a) shall apply to any drug that has been or is hereafter designated under section 526 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360bb) for a rare disease or condition pursuant to the criteria under subsection (a)(2)(B) of such section regardless of—

(1) the date on which such drug is designated or becomes the subject of a designation request under such section;

(2) the date on which such drug is approved under section 505 of such Act (21 U.S.C. 355) or licensed under section 351 of the Public Health Service Act (42 U.S.C. 262) or becomes the subject of an application for such approval or licensure; and

(3) the date on which such drug is granted exclusive approval or licensure under section 527 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 360cc) or becomes the subject of a request for such exclusive approval or licensure.

#### SEC. 3. DETERMINATION OF BUDGETARY EFFECTS.

The budgetary effects of this Act, for the purpose of complying with the Statutory Pay-As-You-Go Act of 2010, shall be determined by reference to the latest statement titled “Budgetary Effects of PAYGO Legislation” for this Act, submitted for printing in the Congressional Record by the Chairman of the House Budget Committee, provided that such statement has been submitted prior to the vote on passage.

The SPEAKER pro tempore. The bill shall be debatable for 1 hour equally divided and controlled by the chair and ranking minority member of the Committee on Energy and Commerce.

The gentleman from New Jersey (Mr. PALLONE) and the gentlewoman from Washington (Mrs. RODGERS) each will control 30 minutes.

The Chair recognizes the gentleman from New Jersey.

#### GENERAL LEAVE

Mr. PALLONE. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and add extraneous material on H.R. 1629, the Fairness in Orphan Drug Exclusivity Act.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New Jersey?

There was no objection.

Mr. PALLONE. Madam Speaker, I yield myself such time as I may consume.

I rise in support of H.R. 1629, the Fairness in Orphan Drugs Exclusivity Act, a bill that will help make some prescription drugs more affordable for the American people.

This Democratic Congress is committed to lowering the costs of prescription drugs so that families are no longer forced to choose between paying for a lifesaving drug or food and rent. This legislation today, H.R. 1629, closes the loophole that has blocked patients from accessing cheaper generic drugs.

Last Congress, this legislation passed the Energy and Commerce Committee and the House by voice vote. Last week, it garnered support from a large

majority in the House but not the two-thirds necessary to pass under suspension of the rules. And so, we are here again today to debate and pass H.R. 1629 that will help us address two national crises: first, the soaring costs of prescription drugs; and second, the ongoing opioid epidemic.

Madam Speaker, this legislation does that by closing a very narrow but real loophole in a program known as the orphan drug program. This program was created through the Orphan Drug Act, which has been successful in basically doing more research and discovery of new therapies to treat and even cure rare diseases. The law incentivizes the development of these lifesaving therapies by awarding 7 years of market exclusivity to manufacturers who receive orphan drug status.

There are two ways that manufacturers can receive these incentives. The first is when manufacturers develop drugs approved to treat diseases with patient populations of 200,000 or fewer. And the second way is if the manufacturer believes that the research and development costs are not expected to be recouped by sales of the underlying drug. This is known as the cost recovery pathway. It is rarely used, but unfortunately, it has led to manufacturers sometimes inappropriately receiving additional exclusivity and, therefore, delaying lower cost generics from coming to the market.

For example, under certain circumstances, if a manufacturer receives orphan drug status for one drug, that status and its incentives can be passed on to future drugs if those drugs treat the same condition and have the same active ingredient. The status and incentives would be available even if those future drugs do not meet the orphan drug qualifications.

What this means, Madam Speaker, is that future drugs can benefit from the 7 years of market monopoly without having to demonstrate that the drug will treat a population of 200,000 or fewer or that they may not be able to recoup the costs of producing the drug.

As a result of this loophole, some manufacturers are marketing widely used drugs to large populations while also blocking generic competition from coming to market.

Now, if I can give an egregious example of this, it comes from one of our most effective drugs to combat opioid use disorder. In 1994, an oral formulation of buprenorphine was granted orphan drug status. At the time, it was not expected that the drug would be prescribed frequently, and as a result, it was unlikely the manufacturer would recoup its development costs. More than 20 years later, however, in 2017, the same manufacturer developed a new injectable formulation of the same drug with the same active ingredient to treat the same condition. As a result, the manufacturer was able to prevent cheaper generics from coming to market.

But by 2017, the opioid epidemic worsened. Our response to the crisis

evolved, and millions were eventually prescribed buprenorphine for treatment, generating billions of dollars in sales.

We know that buprenorphine was not an orphan drug as the law envisions. Nevertheless, the new injectable drug was automatically granted orphan drug status and exclusivity based on the original oral drug's orphan drug designation. This delayed the cheaper generic treatments for opioid use disorder from coming to market, and it kept the price of the drug high and limited access for those in need of treatment.

While the FDA eventually recognized this issue with this particular drug and revoked its orphan drug designation, its exclusivity delayed generic competition that otherwise would be on the market today.

The bottom line is, Madam Speaker, we need every tool available to combat the opioid epidemic, including low-cost, affordable medication treatments, and loopholes like this have to be closed.

H.R. 1629 would stop this from happening again in the future. It requires drug manufacturers to demonstrate in their application to the FDA that each drug application considered under the Orphan Drug Act cost recovery pathway would be unable to recoup development costs at the time of approval. This would include all drugs that seek the orphan drug designation under the cost recovery pathway, including the injectable buprenorphine example I just described. The bill would also ensure that these rules apply to drugs already on the market, so no drug manufacturers can claim orphan drug status without first meeting this requirement.

Now, I want to explain, because I know this is complicated, this bill is narrowly tailored to fix a narrow but very real loophole in the law. We cannot allow these manufacturers to game the system any longer, and that is why we have to close this loophole today.

I thank Congresswoman DEAN, who is the sponsor of the bill. The merits of this bill are obvious, and I know she is going to talk about it more, but that is why it has received strong bipartisan support. I am confident that it will once again get bipartisan support today, make its way through the Senate, and the President will sign it.

I regret that we were not able to pass this legislation last week under suspension, but I believe that we will come together today to close this loophole. I thank our ranking member of the full committee, Mrs. RODGERS, for all of her help with this.

Madam Speaker, I reserve the balance of my time.

Mrs. RODGERS of Washington. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise today in support of H.R. 1629, the Fairness in Orphan Drug Exclusivity Act.

The Orphan Drug Act was enacted to incentivize the development of drugs

that treat rare diseases. Products designated as orphan drugs may be entitled to 7 years of market exclusivity, meaning a drug produced by another manufacturer that contains the same active ingredient to treat the same condition is barred from entering the market during this time.

However, we have seen in recent years that some drug manufacturers, in an effort to block competition from the market, have tried to take advantage of a loophole in existing law. H.R. 1629 will close this loophole and prevent potential abuse of this program in the future.

We must preserve incentives to innovate, especially for drugs that treat rare diseases, while preventing bad actors from attempting to exploit those incentives to benefit from a national crisis, as was done during the opioid epidemic.

This legislation strikes that careful balance. This bill garnered both Republican and Democrat support last Congress. I hope we can continue to work together to move H.R. 1629 forward in the future on a bipartisan basis.

Madam Speaker, I reserve the balance of my time.

Mr. PALLONE. Madam Speaker, I yield such time as she may consume to the gentlewoman from Pennsylvania (Ms. DEAN), the sponsor of this bill.

I commend her for all the work she has done on this bill. This has been several Congresses now, and we are hoping this will be the final one where we get this bill passed.

Ms. DEAN. Madam Speaker, I thank Ranking Member RODGERS and Chairman PALLONE for their leadership on this bill.

I, once again, rise in support of H.R. 1629, the Fairness in Orphan Drug Exclusivity Act.

This crucial legislation would close a current loophole that is used to block competition in the pharmaceutical marketplace.

The Orphan Drug Act of 1983 provided incentives for prescription drug manufacturers to develop products to treat rare diseases. This includes an exclusive 7-year marketing right for therapies that receive an orphan drug designation.

For a drug to qualify, it must either be a treatment for a disease or condition that affects fewer than 200,000 people in the United States or a drug intended for diseases that there is no reasonable expectation to recoup research and development costs.

It would require all drug manufacturers who obtain orphan drug status to prove that they have no reasonable expectation that they will recover R&D costs.

This legislation works to prevent companies from continuing to use orphan drug exclusivity status for a newly approved drug with an identical ingredient to the former version without having to prove the inability to recoup costs.

This exact circumstance, as the chairman described, happened when a

manufacturer of a buprenorphine product tweaked an older product that had received orphan drug status and subsequently was given a renewed orphan drug exclusivity.

Buprenorphine is used as a treatment for opioid use disorder to help those recovering from addiction. Unfortunately, at the time, the opioid epidemic was raging, as it is today, and was by no means a rare disease. And the drug was by no means a market loser. It was a moneymaker.

Closing this loophole would ensure that products do not receive an unfair market advantage and will get more affordable drugs to patients. It ensures consistency with the spirit and intent of the Orphan Drug Act.

Know that we want to encourage and support the development of rare disease treatments and therapeutics. It is critically important. But we cannot allow this important incentive to be co-opted to allow for unfair market competition for drugs that are not a commercial loss.

This bill was supported unanimously last Congress and has broad support among patient advocates. This bill is about ensuring market competition, reducing barriers to the development of new treatments, and, ultimately, supporting patients.

Madam Speaker, I include in the RECORD a letter from 16 patient advocacy organizations in support of this legislation.

MARCH 9, 2021.

Re H.R. 1629—The Fairness in Orphan Drug Exclusivity Act.

Hon. MADELEINE DEAN,  
Washington, DC.

Hon. MARC VEASEY,  
Washington, DC.

DEAR REPRESENTATIVES DEAN AND VEASEY:

Thank you for your leadership on the re-introduction of H.R. 1629, The Fairness in Orphan Drug Exclusivity Act. Our nation is in crisis. Each day, 130 Americans die from an opioid overdose, and according to recent provisional data from the Centers for Disease Control and Prevention, between June 2019 and May 2020, the number of people who died of an opioid overdose increased by 38.4%.

We have a responsibility to ensure that all treatment options are made available to those living with opioid use disorder (OUD). Last year, this important legislation was approved by the House of Representatives unanimously. Unfortunately, the Senate was unable to also act on the measure before the 116th Congress adjourned. The new Congress now has an opportunity to pass this legislation swiftly and improve access to life-saving medication assisted treatments and prevent more lives from being lost. We, the undersigned organizations, support H.R. 1629 and urge quick passage of this important bill that will help ensure the availability of vital treatment options for OUD that can save American lives.

The Orphan Drug Act, enacted in 1983, allows the Food and Drug Administration (FDA) to grant manufacturers Orphan Drug Designation (ODD) and Orphan Drug Exclusivity (ODE) to a product developed to treat rare diseases and conditions affecting less than 200,000 patients. In addition, a manufacturer also can qualify for ODD and ODE if more than 200,000 patients are affected, but there is "no reasonable expectation" of recovering development costs. Few know about

this option, and as a result it is exceedingly rare with only three uses to date.

In such cases, if a newly approved product has the same active ingredient as a previous product that received orphan designation and exclusivity because the FDA determined the original drug could not recoup its development costs, the newly approved product does not have to demonstrate the inability to recoup its development costs. It does not matter how much time has passed, or how much money the newly approved drug is predicted to make. This loophole creates the potential for abuses within the system, and it is not consistent with intent of the Orphan Drug Act.

Enacting H.R. 1629 will: fix this loophole in a narrow and targeted manner to prevent this abuse of the Orphan Drug Act; preserve incentives for development of products treating rare diseases and conditions; and ensure new treatment options come to market to treat OUD.

During this public health emergency, we need all the tools we can muster to fight this crisis. We should not tie one hand behind our back as the exploitation of this loophole would do.

More than 2.1 million Americans live with OUD, making this disease far from rare. This disease is a national public health emergency, and we need to close this loophole to ensure that all safe and effective treatments are available to fight this disease. Thank you again for your leadership on this issue, and we look forward to working with you to help pass H.R. 1629.

Sincerely,

Advocates for Opioid Recovery, AIDS United, Aimed Alliance, Daniel's story, Center for U.S. Policy, Cover2 Resources, FORCE, Healthy Women, Maryland Heroin Awareness, Mother's Addiction Journey, No More OD's, Inc., NOPE Task Force, Prevention Action Alliance, Shatterproof, Tyler's Light, Young People in Recovery.

Ms. DEAN. Madam Speaker, I include in the RECORD the Statement of Administration Policy issued by the Office of Management and Budget on May 17 of this year in support of this bill.

#### STATEMENT OF ADMINISTRATION POLICY

H.R. 1629—FAIRNESS IN ORPHAN DRUG EXCLUSIVITY ACT—REP. DEAN, D-PENNSYLVANIA, AND TWO COSPONSORS

The Administration supports House passage of H.R. 1629, the Fairness in Orphan Drug Exclusivity Act. Orphan drug status is intended to encourage companies to develop promising drugs for rare diseases. Current law provides market exclusivity for drugs that treat any disease or condition which (A) affects fewer than 200,000 persons in the United States, or (B) affects more than 200,000 in the United States and for which there is no reasonable expectation that the cost of developing and making available in the United States a drug for such disease or condition will be recovered from that drug's sales in the United States. H.R. 1629 affects only drugs that qualify under the latter provision. Current law allows market exclusivity to be extended for a new version of the same drug without the drug developer having to show a lack of profitability for that new version as well. This legislation would close that loophole, requiring all drugs that obtain seven years of market exclusivity for conditions affecting 200,000 or more people to illustrate that they have no reasonable expectation of recovering R&D costs through U.S. sales.

The Administration applauds these steps to ensure Americans have access to high quality, affordable treatments.

Ms. DEAN. Madam Speaker, I thank Chairman PALLONE for his support on this bill, and I urge all members to support its passage.

Mrs. RODGERS of Washington. Madam Speaker, I yield back the balance of my time.

Mr. PALLONE. Madam Speaker, I would ask for support for this bill from both sides of the aisle. As I have mentioned in the past, it has passed the House previously.

Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. All time for debate has expired.

Pursuant to House Resolution 403, the previous question is ordered on the bill.

The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

The SPEAKER pro tempore. The question is on passage of the bill.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mrs. GREENE of Georgia. Madam Speaker, on that I demand the yeas and nays.

The SPEAKER pro tempore. Pursuant to section 3(s) of House Resolution 8, the yeas and nays are ordered.

Pursuant to clause 8 of rule XX, further proceedings on this question are postponed.

□ 1245

PROVIDING FOR CONSIDERATION OF H.R. 3233, NATIONAL COMMISSION TO INVESTIGATE THE JANUARY 6 ATTACK ON THE UNITED STATES CAPITOL COMPLEX ACT; AND PROVIDING FOR CONSIDERATION OF H.R. 3237, EMERGENCY SECURITY SUPPLEMENTAL TO RESPOND TO JANUARY 6TH APPROPRIATIONS ACT, 2021

Mr. MCGOVERN. Madam Speaker, by direction of the Committee on Rules, I call up House Resolution 409 and ask for its immediate consideration.

The Clerk read the resolution, as follows:

#### H. RES. 409

*Resolved*, That upon adoption of this resolution it shall be in order to consider in the House the bill (H.R. 3233) to establish the National Commission to Investigate the January 6 Attack on the United States Capitol Complex, and for other purposes. All points of order against consideration of the bill are waived. The bill shall be considered as read. All points of order against provisions in the bill are waived. The previous question shall be considered as ordered on the bill and on any amendment thereto to final passage without intervening motion except: (1) one hour of debate equally divided and controlled by the chair and ranking minority member of the Committee on Homeland Security or their respective designees; and (2) one motion to recommit.

SEC. 2. Upon adoption of this resolution it shall be in order to consider in the House the bill (H.R. 3237) making emergency supple-

mental appropriations for the fiscal year ending September 30, 2021, and for other purposes. All points of order against consideration of the bill are waived. The bill shall be considered as read. All points of order against provisions in the bill are waived. The previous question shall be considered as ordered on the bill and on any amendment thereto to final passage without intervening motion except: (1) one hour of debate equally divided and controlled by the chair and ranking minority member of the Committee on Appropriations or their respective designees; and (2) one motion to recommit.

The SPEAKER pro tempore. The gentleman from Massachusetts is recognized for 1 hour.

Mr. MCGOVERN. Madam Speaker, for the purpose of debate only, I yield the customary 30 minutes to the gentleman from Oklahoma (Mr. COLE), my friend, pending which I yield myself such time as I may consume. During consideration of this resolution, all time yielded is for the purpose of debate only.

#### GENERAL LEAVE

Mr. MCGOVERN. Madam Speaker, I ask unanimous consent that all Members be given 5 legislative days to revise and extend their remarks.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Massachusetts?

There was no objection.

Mr. MCGOVERN. Madam Speaker, I yield myself such time as I may consume.

Yesterday, the Committee on Rules met and reported a rule, House Resolution 409. The rule provides for consideration of H.R. 3233 to establish a National Commission to Investigate the January 6 Attack on the United States Capitol Complex Act, under a closed rule.

The rule provides 1 hour of debate equally divided and controlled by the chair and ranking minority member of the Committee on Homeland Security or their designees and provides one motion to recommit.

The rule also provides for consideration of H.R. 3237, the Emergency Security Supplemental to Respond to January 6 Appropriations Act, 2021, under a closed rule.

The rule provides 1 hour of debate equally divided and controlled by the chair and ranking minority member of the Committee on Oversight and Reform or their designees, and provides for one motion to recommit.

Madam Speaker, it has been 133 days since an angry mob of insurrectionists tried to stop the certification of a free and fair election in America. The question before us today is this: What are we going to do about it?

Some of my colleagues on the other side want to sweep this dark chapter under the rug. Just last week, one Republican said the events of January 6 resembled a "normal tourist visit."

Madam Speaker, I was here presiding over the House on January 6. People died that day. Police officers were beaten and bloodied. America's Capitol, the symbol of our freedom and the